



#9/Amndt A/EOT
8.26.03 (1)
Atty. Docket No. COR20 P-403
C Moore

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Kevin S. Wood
Appln. No. : 09/945,313
Applicant : Marc G. Brun et al.
Art Unit : 2874
Confirmation No. : 2735
Filing Date : August 31, 2001
For : MULTIPLE-PORT OPTICAL PACKAGE AND DWDM MODULE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT

In response to the Office Action mailed March 19, 2003, please amend the application as set forth below. A request for a one-month extension of time has been filed with this Amendment.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 24 of this paper.

Remarks begin on page 29 of this paper.

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Atty. Docket No. COR20 P-403

CERTIFICATE OF MAILING

I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.

July 21, 2003

Date

Cara L. Chlebek

Cara L. Chlebek

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Commissioner for Patents
P.O. Box 1450
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Dear Sir:

Enclosed is an Amendment in response to the Office Action dated March 19, 2003. The items checked below are appropriate:

Applicants hereby petition for a one-month extension of time to respond to the above Office Action. The fee of \$110 for the Extension is enclosed.

Any fee for additional claims has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 22	Minus	** 28	= 0	x \$9	\$ 00	x \$ 18	\$ 00
Independent Claims	* 5	Minus	*** 6	= 0	x \$42	\$ 00	x \$ 84	\$ 00
First Presentation of Multiple Dependent Claims \$140					\$ 00	x \$280	\$ 00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$ 00		\$ 00	

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Page : 2

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.
- Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- No additional fee is required.
- A fee of _____ to cover the cost of the additional claims added by this response is enclosed.
- X A fee of \$110 to cover Petition for Extension of Time is enclosed.
- X A check in the amount of \$110 is enclosed to cover the above fees.
- X Please charge any additional fees or credit overpayment to Deposit Account 16 2463. A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,
DEWITT & LITTON

7-21-2003

Date



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TSC/clc